## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10619363

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |              |  |                      |                  |          | SMALL ENTITY TYPE   |                        |       | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|--|---|--------------|--|----------------------|------------------|----------|---------------------|------------------------|-------|-------------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 7            |  |                      |                  |          | RATE                | FEE                    |       | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED |  | NUMBER EXTRA         |                  |          | BASIC FEE           | 375.00                 | OR    | BASIC FEE                     | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | ີ່ minus 20≃ |  | •                    |                  |          | X\$ 9≈              |                        | OR    | X\$18≑                        |                        |
| IND  | EPENDENT CL                                    | AIMS                                      | ) mi         | nus 3 =                                  | *                    |                  |          | X42=                |                        | OR    | X84=                          |                        |
| MU   | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | RESENT       |  |                      |                  |          | +140=               |                        | OR    | +280≃                         | ·                      |
| ÷ if   | the difference                                 | in column 1 is                            | less than ze | "0" in c                                 | olumn 2              | . !              | TOTAL    |                     | OR                     | TOTAL | 110                           |                        |
| CLAIMS AS AMENDED - PART II  |  |   |              |  |                      |                  |          |                     |                        | •     | OTHER                         | THAN                   |
| <u>,</u>   | 1/19/04  | (Column 1)                                |              | (Colur                                   |                      | (Column 3)       | ι.       | SMALL E             | NTITY                  | OR    | SMALL                         |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID           | BE <b>R</b><br>DUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | × 9                                       | Minus        | -2                                       | 2                    | =                |          | X\$ 9=              |                        | OR    | X\$18=                        |                        |
|  | Independent                                    | · 9                                       | Minus        | ***3                                     |                      | = <              | $\Box$   | X42=                |                        | OR    | X84=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |              |  |                      |                  |          | +140=               | ·                      | OR    | +280=                         |                        |
|  |  |   |              |  |                      |                  | 1        | TOTAL               |                        | 1     | TOTAL                         |                        |
|  |  | ,   | ADDIT. FEE   |  | ,                    | ADDIT. FEE       |          |                     |                        |       |                               |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | (Colur<br>HIGH<br>NUMI<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY  | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | ÷   | Minus        | **                                       |                      | =                | 11       | X\$ 9=              |                        | OR    | X\$18=                        |                        |
|  | Independent                                    | *   | Minus        | ***                                      |                      | ٠,               | ]        | X42=                |                        |       | X84=                          |                        |
| _  | FIRST PRESENTATION OF MULTIPLE DEPEN           |   |              |  | CLAIM                |                  | ]        |                     |                        | OR    |                               |                        |
|  |  |   |              |  |                      |                  | ·        | +140=               |                        | OR    | +280= )                       |                        |
|  |  |   |              |  |                      |                  | ,        | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE           |                        |
| <del></del> -  |  | (Column 1)                                |              | (Colun                                   |                      | (Column 3)       | <b>L</b> |                     |                        |       | •                             |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIĞH<br>NUME<br>PREVIC<br>PAID I         | BER<br>JUSLY         | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                                       | •                    | = , .            |          | X\$ 9=              |                        | OR    | X\$18=                        |                        |
|  | Independent                                    | .* .                                      | Minus        | ***                                      |                      | #                | ]        | X42=                |                        |       | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |  |                      |                  |          |                     |                        | OR    |                               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |              |  |                      |                  |          |                     |                        |       | +280=                         |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |  |                      |                  |          |                     |                        |       |                               |                        |